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**\*BIBDATASHEET\***

CONFIRMATION NO. 8817

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/073,277	<b>FILING OR 371(c) DATE</b> 02/13/2002 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 13202.00369
<b>APPLICANTS</b> Ian M. Penn, Vancouver, CANADA; Donald R. Ricci, Vancouver, CANADA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/672,767 09/29/2000 PAT 6,375,677 which is a CON of 09/142,508 02/16/1999 PAT 6,217,608 * (*)Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b> CANADA 2,171,047 03/05/1996 CANADA 2,175,722 05/03/1996 CANADA 2,185,740 09/17/1996 CANADA 2,192,520 12/10/1996				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/12/2002</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 1
Verified and Acknowledged Examiner's Signature _____ Initials <u>VB</u>		<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 27160				
<b>TITLE</b> Expandable stent and method for delivery of same				
<b>FILING FEE RECEIVED</b> 2734	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	